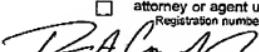


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PTO/SB/22 (12-04)

Approved for use through 07/31/2006. OMB 0551-0031  
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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 040432-0284085	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816))			
Application Number 10/009,347		Filed June 26, 2002	
<b>For MODIFICATION OF BIOLOGICAL ELEMENTS</b>			
Art Unit 1636		Examiner G. G. Leffers Jr.	
This is a request under the provisions of 37 CFR 1.138(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<b>Fees</b>	<b>Small Entity Fees</b>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120	\$60
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080
<b><u>      </u></b>			
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>033975</u> . I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>40944</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34			
 Signature Thomas A. Cawley, Jr., Ph.D.		<u>August 9, 2005</u> Date 703.905.2000 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> forms are submitted.			

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of forms are submitted

August 9, 2005

Date

703.805.2000

**Telephone Number**

Time is given by 35 U.S.C. 122 and 37 CFR 1.80 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed forms. You may experience variations in the time required depending on the amount of time you require to complete this form and/or any attachments for which you are responsible. The burden estimate does not include the time you may be required to receive a response from the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTD-9189 and select option 2.

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